JUL - 9 2001

510 (k) SUMMARY OF SAFETY AND EFFECTIVENESS

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92.

The assigned 510(k) number is:

K002099

Applicant information:

Date Prepared:

May 21, 2001

Name:

BesCon Co., Ltd.

Address

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Contact Person:

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Initial US Distributors:

Optech, Inc.

800-525-7465

Stephen A. Dunn, Inc.

406-862-2031

Device Information:

Device Classification:

Class II

Classification Number:

LPL

Classification Name:

Lenses, Soft Contact, Daily Wear

Trade Name:

S38 (polymacon) Spherical, aspherical, toric and multifocal Soft Contact

Lens for Daily Wear (clear and tinted, fully molded)

Purpose of 510(k) Submission:

BesCon Company proposes to manufacture, market and sell in United States interstate commerce, a soft contact lens of the (polymacon) soft contact lens material and made available in a spherical, aspherical, toric and multifocal product configuration. Data supporting substantial equivalency to predicate devices, and safety and efficacy of the (polymacon) polymer is contained in this submission.

Equivalent Devices:

The S38 (polymacon) Spherical, aspherical, toric and multifocal Soft Contact Lens is substantially equivalent to the following predicate device:

Predicate devices:

- "Hydron Biomedics" (polymacon) manufactured by Ocular Sciences, Inc.
- "Polyplus" (polymacon) manufactured by Optech Inc.
- "PolyVue" (polymacon) manufactured by Optech Inc.

Device Description:

The S38 (polymacon) Soft Contact Lenses are hemispherical shells with molded spherical base curves and molded front surfaces. The S38 soft contact lens is fabricated from a nonionic polymer. The nonionic lens material, (polymacon) is a hydrophilic polymer of 2- Hydroxyethyl methacrylate (2-HEMA) and cross-linked with ethylene glycol dimethacrylate (EGDMA), plus an initiator. The co-polymer consists of 62% polymacon and 38% water by weight when immersed in normal buffered saline solution. The lenses are available clear or tinted. Lenses are tinted with one or a combination of one or more of the following pigments, 'listed' color additives: Phthalocyanine blue, Phthalocyanine green, and titanium dioxide. Lenses that contain a unique tinting pattern are subsequently processed to incorporate the 'listed' color additives, and contain only the amount of color additive needed to accomplish the intended coloring effect.

In the hydrated state, the lens conforms to the curvature of the eye covering the cornea and extending slightly beyond the limbus forming a transparent or colored optical surface. The (polymacon) soft hydrophilic contact lens has a spherical back surface. The hydrophilic properties of the lens require that it be maintained in a fully hydrated state in a solution compatible with the eye. If the lens dries out, it will become hard and appear somewhat warped however, it will return to its proper configuration when completely rehydrated in the proper storage solution. The hydrophilic characteristics allow aqueous solutions to enter the lens and in its fully hydrated state the lens is approximately 38% water by weight. The physical properties of the lens are:

Refractive Index1.43 (hydrated)Light Transmission (clear)greater than 90%Light Transmission (tinted)greater than 90%Water Content $38\% \pm 2\%$ Oxygen Permeability 8.4×10^{-11} (cm²/sec) (ml O₂/ml x mm Hg @ 35°C), (revised Fatt method).

Intended Use:

The S38 (polymacon) Spherical Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in aphakic and not aphakic persons with non-diseased eyes with myopia or hyperopia. The lens may be worn by persons who exhibit refractive astigmatism of .50 diopters or less where the astigmatism does not interfere with visual acuity. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

The S38 (polymacon) Aspherical Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in aphakic and not aphakic persons with non-diseased eyes with myopia or hyperopia and possess early presbyopia not exceeding 1.50 diopters add power. The lens may be worn by persons who exhibit refractive astigmatism of 1.50 diopters or less where the astigmatism does not interfere with visual acuity. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

The S38 (polymacon) Toric Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in not aphakic persons with non-diseased eyes with myopia or hyperopia and/or possesses refractive astigmatism not exceeding 5.00 diopters. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

The S38 (polymacon) Multifocal Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in not aphakic persons with non-diseased eyes with myopia or hyperopia and are presbyopic. The lens may be worn by persons who exhibit refractive astigmatism of 1.50 diopters or less where the astigmatism does not interfere with visual acuity. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

Eyecare practitioners may prescribe any of the above lenses for frequent/planned replacement wear, with cleaning disinfection and scheduled replacement. When prescribed for frequent/planned replacement wear, the lens may be disinfected using a chemical disinfecting system.

Biocompatibility Testing:

The following toxicology tests were performed on the soft contact lens: Systemic Injection Toxicity Test, Ocular Irritation Test, and Cytotoxicity Test. The test results raise no acute toxicological concerns and support safety of the lens for its intended use.

Toxicology testing of the blister package plastic container with an aluminum foil top was performed. This testing included the following: Systemic Injection Toxicity Test, Ocular Irritation Test, and Cytotoxicity Test. The test results raise no acute toxicological concerns and support safety of the package for its intended use.

Substantial Equivalence:

The S38 Soft Contact Lens will be manufactured according to specified process controls and a CGMP quality assurance program currently in place. The established safety profile (pre-clinical toxicology and manufacturing/chemistry data) of the S38 material is equivalent to the predicate devices identified previously. Being similar with respect to indications for use, materials, physical construction and safety & effectiveness to the predicate devices, this meets the requirements per section 510(k) of the act regarding substantial equivalence and <u>does not raise</u> different questions of safety and effectiveness than the predicate device identified above.

The following matrix illustrates the equivalencies of the S38 Spherical, aspherical, toric and multifocal soft contact lens, as well as the substantial equivalent predicate devices.

Substantial Equivalence Matrix

Substantial Equivalency	S38	Hydron Biomedics 38 'Predicate Device'	PolyVue 'Predicate Device'	Polyplus 'Predicate Device'
Manufacture	BesCon Co., Ltd.	Ocular Sciences, Inc.	Optech, Inc.	Optech, Inc.
INDICATION	Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in aphakic and not aphakic persons with non-diseased eyes with myopia or hyperopia and/or possesses refractive astigmatism not exceeding 5.00 diopters, and/or are presbyopic. NOTE: refractive astigmatism and presbyopia N/A for spherical lenses.	Soft Contact lenses for daily wear are indicated for the correction of refractive ametropia (myopia, hyperopia and astigmatism) in aphakic and not aphakic persons with non-diseased eyes that may exhibit refractive and/or corneal astigmatism up to 2.50 diopters. NOTE: refractive astigmatism N/A for spherical lenses.	Soft Contact lenses for daily wear are indicated for the correction of refractive ametropia (myopia and hyperopia), presbyopia and astisgmatism in aphakic and not aphakic persons with non- diseased eyes. NOTE: refractive astigmatism N/A for spherical lenses.	Soft Contact lenses for daily wear are indicated for the correction of refractive ametropia (myopia and hyperopia), and astisgmatism in aphakic and not aphakic persons with non-diseased eyes. NOTE: refractive astigmatism N/A for spherical lenses.
INTENDED USE	Daily Wear, Soft (hydrophilie) Contact Lens	Daily Wear, Soft (hydrophilic) Contact Lens	Daily Wear, Soft (hydrophilic) Contact Lens	Daily Wear, Soft (hydrophilic) Contact Lens
Manufacturing Method	Fully-molded	Fully-molded	Lathe-cut (Semi-Mold)	Lathe-cut (Semi-Mold)
USAN name Material name	polymacon	polymacon	ocufilcon A	ocufilcon A
Water Content (%)	38.0%	38.0%	46.2%	46.2%
Toxicity (safety)	Non-Toxic	Non-Toxic	Non-Toxic	Non-Toxic



SILL - 9 2001

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

BesCon Co., Ltd c/o Mr. Martin Dalsing Medvice Consulting, Inc. 623 Glacier Drive Grand Junction, CO 81503

Re: K002099

Trade Name: S38 (polymacon) Spherical, Aspherical, Toric and Multifocal

Soft Contact Lens for Daily Wear (clear and tinted, fully molded)

Regulation Number: 21 CFR 886.2925

Regulatory Class: Class II Product Code: 86 LPL Dated: May 21, 2001 Received: June 1, 2001

Dear Mr. Dalsing:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-6413. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours, A. Rugh freithel

A. Ralph Rosenthal, M.D.

Director

Division of Ophthalmic and Ear,

Nose and Throat Devices Office of Device Evaluation

Center for Devices and

Radiological Health

INDICATIONS FOR USE STATEMENT

Device Name:

S38 (polymacon) Spherical, aspherical, toric and multifocal Soft Contact Lens for Daily Wear (clear and tinted, fully molded)

INDICATIONS FOR USE:

The S38 (polymacon) Spherical Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in aphakic and not aphakic persons with non-diseased eyes with myopia or hyperopia. The lens may be worn by persons who exhibit refractive astigmatism of .50 diopters or less where the astigmatism does not interfere with visual acuity. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

The S38 (polymacon) Aspherical Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in aphakic and not aphakic persons with non-diseased eyes with myopia or hyperopia and possess early presbyopia not exceeding 1.50 diopters add power. The lens may be worn by persons who exhibit refractive astigmatism of 1.50 diopters or less where the astigmatism does not interfere with visual acuity. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

The S38 (polymacon) Toric Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in not aphakic persons with non-diseased eyes with myopia or hyperopia and/or possesses refractive astigmatism not exceeding 5.00 diopters. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

The S38 (polymacon) Multifocal Soft Contact Lenses for daily wear are indicated for the correction of visual acuity in not aphakic persons with non-diseased eyes with myopia or hyperopia and are presbyopic. The lens may be worn by persons who exhibit refractive astigmatism of 1.50 diopters or less where the astigmatism does not interfere with visual acuity. The lens is available clear or tinted and may be used to enhance or alter the apparent color of the eye.

Eyecare practitioners may prescribe any of the above lenses for frequent/planned replacement wear, with cleaning disinfection and scheduled replacement. When prescribed for frequent/planned replacement wear, the lens may be disinfected using a chemical disinfecting system.

Conce	urrence of CDRH, Office of Device Evaluation	on (ODE)
	(Division Side-Off) Division of a metalmic Devices 510(k) Number (20209)	
Prescription Use (Per 21 CFR 801 109)	or	Over-The-Counter Use

(Optional Format 1-2-96)